



PATENT  
450100-03144

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s) : Yoshiyuki TAKAKU et al.

Serial No. : 09/824,269

For : **INFORMATION PROCESSING DEVICE, CONTROL  
DEVICE, INFORMATION PROCESSING SYSTEM, AND  
METHODS THEREOF**

Filed : April 2, 2001

Examiner : A. Casiano

Art Unit : 2182

**RECEIVED**

DEC 22 2003

Technology Center 2100

745 Fifth Avenue  
New York, NY 10151  
Tel. (212) 588-0800

I hereby certify that this correspondence is being deposited with  
The United States Postal Service as first class mail in an envelope  
addressed to: Mail Stop Non-Fee Amendment, Commissioner for  
Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

Darren M. Simon, Reg. No. 47,946

\_\_\_\_\_  
Name of Applicant, Assignee or Registered Representative

\_\_\_\_\_  
Signature

\_\_\_\_\_  
December 17, 2003

Date of Signature

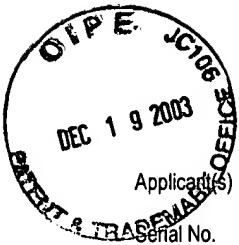
**AMENDMENT**

Mail Stop Non-Fee Amendment  
Commissioner for Patents  
Alexandria, VA 22313-1450

Dear Sir:

Responsive to the non-final Office Action which issued September 26, 2003, please  
consider the following amendment to the above-referenced application.

2182



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Serial No. : 09/824,269  
For : INFORMATION PROCESSING DEVICE, CONTROL DEVICE, INFORMATION  
PROCESSING SYSTEM, AND METHODS THEREOF  
Filed : April 2, 2001  
Examiner : CASIANO, Angel L.  
Group Art Unit : 2182

Mail Stop Non-Fee Amendment  
Commissioner for Patents  
Alexandria, VA 22313-1450

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Technology Center 2100

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.  
☐ The fee has been calculated as shown below.  
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional fee
Total claims	16	Minus	20 =	0 ×	\$18(9)	= \$0
Independent claims	6	Minus	6 =	0 ×	\$86(43)	= \$0
			Total additional fee for This amendment			\$0

- \* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  
\*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.  
\*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$290 (\$145) has been previously paid \_\_, or is paid herewith \_\_.  
☐ This response is being filed within the month following the expiration of the term originally set therefor. This is a petition to request a -month extension of time. A check covering the cost of the petition is enclosed.  
☐ A check in the amount of \$.00 is attached, which covers the cost of ☐ additional claims and ☐ -month petition for extension of time.  
☐ Charge \$\_\_ to Deposit Account No. 50-0320.  
☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on December 17, 2003

Darren M. Simon, Reg. No. 47,946

Name of Applicant, Assignee or Registered Representative

*Darren M. Simon*

Signature

December 17, 2003

Date of Signature

FROMMER LAWRENCE & HAUG, LLP  
Attorneys for Applicant(s)

*Darren M. Simon*

By: Darren M. Simon  
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